

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Jan 27 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # M92930 (0)
 1. Corporation Name
FEDERAL TRUST CORPORATION



Principal Place of Business 1270 ORANGE AVENUE SUITE C WINTER PARK FL 32789	Mailing Address 1270 ORANGE AVENUE SUITE C WINTER PARK FL 32789-4946
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3. Date Incorporated or Qualified 08/05/1988	3a. Date of Last Report 04/17/1996
4. FEI Number 59-2935028	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 1211 Orange Avenue Suite, Apt. #, etc.	2a. Mailing Address 26 1211 Orange Avenue Suite, Apt. #, etc.
22 City & State 23 Winter Park, Florida	27 City & State 28 Winter Park, Florida
24 Zip 32789	25 Country USA
29 Zip 32789	30 Country USA

9. Name and Address of Current Registered Agent WRIGHT, AUBREY H J 1211 ORANGE AVE SUITE C WINTER PARK FL 32789	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	NAME BELL, JAMES T	1.1 TITLE P/C/D	1.2 NAME JAMES V. SUSKIEWICH
STREET ADDRESS 1270 ORANGE AVE., SUITE C	CITY-ST-ZIP WINTER PARK FL 32789	1.3 STREET ADDRESS 908 RIDGE SPRING COURT	1.4 CITY-ST-ZIP APOPKA, FL 32712
TITLE S	NAME JONES, CAROLE M	2.1 TITLE VP/D	2.2 NAME AUBREY H. WRIGHT, JR.
STREET ADDRESS 1270 ORANGE AVE., SUITE C	CITY-ST-ZIP WINTER PARK FL 32789	2.3 STREET ADDRESS 1176 VALLEY CREEK RUN	2.4 CITY-ST-ZIP WINTER PARK, FL 32792
TITLE AS	NAME CONNOLLY, ELIZABETH	3.1 TITLE S	3.2 NAME CLAIR I. FORD
STREET ADDRESS 1270 ORANGE AVE., SUITE C	CITY-ST-ZIP WINTER PARK FL	3.3 STREET ADDRESS 1040 VERNON LOOP	3.4 CITY-ST-ZIP OVIEDO, FL 32765
TITLE D	NAME FEILER, EDWIN J	4.1 TITLE D	4.2 NAME JENNIFER B. BRODNAX
STREET ADDRESS 120 HABERSHAM STREET	CITY-ST-ZIP SAVANNAH GA	4.3 STREET ADDRESS 1660 TREMONT LANE	4.4 CITY-ST-ZIP WINTER PARK, FL 32792
TITLE D	NAME WEST, FRANCIS T	5.1 TITLE D	5.2 NAME JAMES T. BELL
STREET ADDRESS WEST POINT, S.R. 628 NEAR VISTA POINT	CITY-ST-ZIP PENHOOK VA 24137	5.3 STREET ADDRESS 1270 ORANGE AVENUE, SUITE C	5.4 CITY-ST-ZIP WINTER PARK, FL 32789
TITLE D	NAME SUSKIEWICH, JAMES V	6.1 TITLE	6.2 NAME
STREET ADDRESS 908 RIDGESPRING COURT	CITY-ST-ZIP APOPKA FL	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE: *[Signature]* **REQUIRED** 1/15/97 407-645-1201
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
Aubrey H. Wright, Jr. Sr.V.P.

CR2E034 (9/96)